

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) BRUCE BURBRIDGE			2. FEC Candidate Identification Number	
(b) Address (number and street) PO BOX 2238		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Aberdeen WA 98520		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation INDEPENDENT	5. Office Sought PRESIDENCY	6. State & District of Candidate WA		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 election(s).
(year of election)
- NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) BRUCE 4 PRESIDENT
(b) Address (number and street) PO BOX 2238 ABERDEEN WA 98520
(c) City, State, and ZIP Code

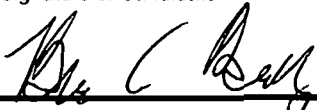
DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.
- NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)
(b) Address (number and street)
(c) City, State, and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate 	Date 04/21/2023
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. **NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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(b) Address (number and street)

(c) City, State, and ZIP Code

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(b) Address (number and street)

(c) City, State, and ZIP Code

NON-04-24-09-00441721

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PRESS FIRMLY TO SEAL



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DELIVERY OPTIONS (Customer Use Only)

- ☐ SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
- ☐ Delivery Options
- ☐ No Saturday Delivery (delivery not business day)
- ☐ Sunday/Holiday Delivery (required additional fee, where available)
- Refer to USPS.com or local Post Office for availability.

ORIGIN/POSTAL SERVICE USE ONLY

PO Zip Code

Day

Scheduled Delivery Date (MM/DD/YY)

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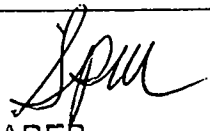
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 4/21/23
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (3/2015)	4/24/23 DATE PREPARED

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